

Woodbridge (J. E.)

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SOCIETY TO CONSUMPTIVES.

BY

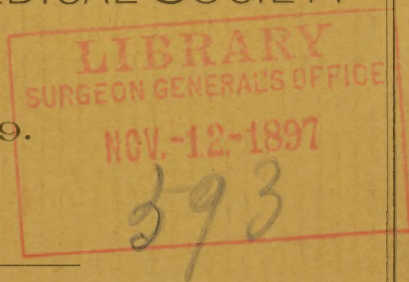
J. E. WOODBRIDGE, M.D.,

YOUNGSTOWN, O.

FROM TRANSACTIONS

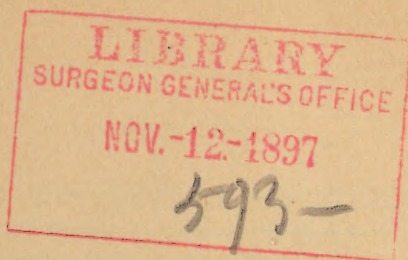
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## THE DUTY OF THE OHIO STATE MEDICAL SOCIETY TO CONSUMPTIVES.

BY J. E. WOODBRIDGE, M.D., YOUNGSTOWN, OHIO.

In calling your attention to the duty of the Ohio State Medical Society to "Consumptives and their Medical Advisers," you will perhaps deem me guilty of wasting your time on a subject on which little of consequence can be said, and which, at most, is a matter of minor importance. If so, your opinions are well sustained by the summary manner in which the subject has been treated by the best medical authorities in all ages of the world's history.

Hidden away in the nomenclature of diseases you may find the various names by which it has been designated. Search your text-books, but you will find nothing in the manner in which phthisis has been treated to lead you to conclude that the disease is one of unusual importance; and if you search the records of this Society for any evidence that consumption demands, or ought to have, any special attention paid to it or to its victims, you will find it wanting; and yet we have under consideration an infectious disease more fatal than small-pox or cholera or scarlatina, more fatal than all combined—in fact, numbering among its victims, as shown by the last census of the United States, more adults than all other infectious and contagious diseases together; affecting all classes of people, of every age, condition and sex; leading its victims



by slow gradations, extending often over a series of years of hopeless invalidism to the grave. Its death-rate is truly appalling. But we have become accustomed to its ravages, and in a measure reconciled to them, and regard deaths from consumption as a kind of visitation of Providence, from which there is no escape, and yet the same kind of a visitation of cholera or small-pox would arouse such a feeling of horror and indignation as none of us would like to face.

The consumptive, however, pursues the even tenor of his way, and in a large majority of the cases that come under my observation, insufficiently or improperly fed, or both, unscientifically and generally poorly clothed, their dying arouses no indignation, and often but scant sympathy. They are regarded simply as the victims of an incurable disease, and walking about with their clouded brows awaiting the dropping of the curtain over the final act, they constantly remind one of the terrible inscription over the entrance to Dante's Hell, "All hope abandon ye who enter here."

But a new day is dawning on our friends.

When Lewis A. Sayre, at the meeting of the American Medical Association at Philadelphia, in 1876, battled bravely and alone for the true pathology of the so-called tubercular diseases of joints, he was perhaps all unconsciously brushing away the mysticisms and errors of ages from the pathology of a far more important disease; and when a Swiss peasant, condemned to die of this disease in the sunnier lands to which he had expatriated himself, returned to his bleak mountain home to end his days, and instead, continued to live, he touched the key-note to its treatment, and the time is almost here when the pathology and treatment, and even the nomenclature, but, most of all, the prognosis of the disease must be re-written, and in a far more hopeful spirit than has characterized its history

in the past. Look at that past. Glance at the literature of consumption during the past century. Study the writings and teachings of the best authorities of the present day. What a conglomerate it is !

Future generations, reading this stuff, will say it was written by isolated members of a widely scattered profession, having no means of communicating with each other, and yet this is the close of the nineteenth century, the age of telegraph and telephone, of county, state, national and international medical societies. But none of them, so far as my observation has extended, pay much attention to the most fatal disease which we are called upon to treat.

What have we of the Ohio State Medical Society done ? Nothing. In 1878 Dr. Loomis read, before the American Medical Association, an able and exhaustive report on the climatic treatment of consumption, which bore evidence of careful thought and research; it was fully abreast of its time.

But ten years have passed since then and we live in an age of progression—an age in which mighty events are crowding each other off the stage of action. A decade now means more than a century did some hundreds of years since. And can any gentleman point me to any positive, more recent advances we have made in knowledge of the pathology, prophylaxis, or treatment of consumption ? While wonderful discoveries are being made, and the profession which we love and practice is making its full share of them, the great mass of that profession is in no sense better prepared to answer any question bearing upon the treatment of this disease than were its members three hundred years ago.

Give any large number of physicians a typical case of incipient consumption and ask them what they would do for it, what kind of reading, think you, their answers would make ? From a knowledge of what has gone be-



fore, it would be safe to say that the patient would receive some very contradictory advice. He would probably be told to stay at home, take cod-liver oil and tonics, and a hundred other remedies; to use Borgeon's method; to go to southern California, New Mexico or Colorado; to Rome; to the Riviera; to Davos Platz, and, in short, to almost every inhabited or habitable spot on the globe. One patient, after consulting the family physician, visited Philadelphia, New York and Boston, consulting seven eminent gentlemen; was advised to go to southern California, to Bermuda, Chautauqua Lake, Denver and Florida. All could not be right. Nearly, if not quite all, were probably wrong. Yet these are far above the average members of the medical profession. How, then, would a patient fare with the average practitioner? A gentleman, resident of New York city, after consulting his family physician, who advised him to go to Europe, but who frankly admitted that he did not know what would be the best place, called in an eminent authority who advised him to go to Rome. In various parts of Europe he consulted the most celebrated physicians, and finally returned to this country, and after this long experience gave as his deliberate opinion that neither the medical men of Europe nor America know anything about the climatic treatment of consumption; and it must be confessed that even the best medical literature of the day or age gives such varied and widely divergent theories on the subject, that such opinion would seem to be well founded.

Now the medical advisers of consumptives should be taught enough about the prophylaxis and treatment of consumption to save the profession the disgrace of so much contradictory advice to the victims of so important and wide-spread a disease.

Your author has given many years to the subject, and if his time and yours were unlimited he could tell you of

many existing differences between celebrated health resorts, as seen through partial and highly colored advertisements, and impartial, truth-seeking eyes.

He has wintered in southwestern Texas, a few years since the Mecca for consumptives, and in the southeastern portion of the United States; has visited various points on our Atlantic coast and many of the resorts of Colorado, New Mexico and southern California, and has found that, in many instances at least, the place that from a distance of some hundreds or thousands of miles seemed most desirable, on closer inspection proved least so, and it is his belief that the ideal health resort for consumptives, if there be one, has either not yet been discovered, or sufficiently advertised to attract much attention. Colorado, with its wonderful sunshine, pure air, high altitudes, grand scenery and occasional pine forests, possesses many advantages not found elsewhere, but some of its best advertised health resorts are unfit for residence of even healthy men. As, for instance, Colorado Springs, which really has much to recommend it, was, at the date of my visit, November, 1888, a town of about seven thousand inhabitants, without sewers, is at times exceedingly dusty, is subject to high winds, has irrigation ditches on each side of its streets, and the sun sets early, making the day short.

Your author asked one of the leading physicians of the place how he could reconcile the existing conditions with its claims as a health resort. The doctor answered that, "dust is considered an antiseptic to external wounds, and may it not perform the same office in the lungs?"

Many such instances might be given to show the insurmountable obstacles which lie in the path of the individual practitioner who endeavors to do his whole duty to his lung patients. Individual members of the profession may, and no doubt have, in exceptional instances, at



least, made some progress in a knowledge of this branch of our subject, but it has been at a fearful sacrifice of human life, and it may be doubted if the lesson is always worth the price paid for it.

During all my investigations, one prominent fact has always presented itself, viz., that the climate which seemed most nearly curative of consumption is most aseptic, and, as a consequence, when you place your patient under the best climatic influence, you also place him where he will do least harm, where he is least likely to communicate his disease to his friends and attendants. And if this is true, and can be demonstrated to the satisfaction of the Ohio State Medical Society and of the American Medical Association, so that these bodies could go before the world confidently teaching the correct climatic treatment of this one disease, would not that add greatly to their already high reputation? We are rich in deep thinkers and careful and scientific investigators, and here is a broad field for the exercise of their talents.

But how is this to be done? Let the Ohio State Medical Society appoint a committee charged with the duty of the investigation of all matters of interest to consumptives and their medical advisers, and especially of the climatic treatment of the disease, and report the result of its labors at the next meeting of this Society. Such a committee could accomplish much that to the individual practitioner would be impossible.

#### DISCUSSION.

Dr. H. J. Herrick, Cleveland, Ohio, said:

*Mr. President:* At the present time, any thought relative to consumption is worthy of attention. If the thought is drawn from clinical experience, as is that of this paper, it comes with the force that commands attention; if it comes only from speculation and theory, it meets speculation and theory from others.



The author accepts the theory of the contagiousness of tuberculosis, and that theory, judging from the literature of to-day, seems to be gaining ground. It must be admitted by those who advocate this theory, that it is rather a sequence of the theory that tuberculosis is caused by the bacillus, rather than a conclusion drawn from clinical experience. The mortality from some form of tuberculous disease varies in different communities at from 10 to 12 per cent. of all deaths. No community, climate or location is exempt from it. Yet no physician, I think, from his clinical experience, can from cases observed, present even a shadow of a ground for the theory of infection. Such would be my decision, were I to review my experience in quite extensive practice for the last thirty years. I should quite as soon speak of the contagious character of pneumonia, inflammation of the brain, or other idiopathic diseases. I have a paper on the modern views of tubercle which I hope to present to this Society, in which I attempt to show that the modern views as to the etiology of tubercle are not established beyond question; further, it appears that the treatment, based upon the theory of a specific cause, does not add any advantage to the patient. Further, I do not believe that tuberculosis finds in climate the most effective line of treatment. The atmosphere is a condition of one of the most elementary and essential functions of the body, viz., respiration. The process of respiration we are quite familiar with. Physiology in detail gives us the changes wrought in the blood by air through the vesicles of the lungs.

The pernicious effect of air must be found in the fact that it is not capable of meeting the wants of respiration, or that there is borne through it some noxious or infecting material which affects the blood deleteriously in its passage through the lungs. The fact, however, that the masses are able to breathe and enjoy with perfect health a certain atmosphere, is *prima facie* evidence that some other function must be looked to for affording the benefit derived. Other factors besides air are essential for healthy life. When the medical profession join in the thoughtless experiment of sending patients to some other climate, warmer or colder, with greater or lower altitude, dry

or moist, with no definite conclusions as to the effect of either high, dry, low or moist atmosphere, I think we are very easily, and I fear thoughtlessly, shifting a hopeless case from our shoulders, a responsibility, with the vague hope, possibly, that good will come. Many are the victims that have sacrificed home comforts, kind friends and everything that would give promise, for the unassuring hopes of a "change of climate."

I have come to regard food as a more important agent in the treatment of consumptives than climate, and if I include appropriate exercise and out-door life, I think we have the most important means at our command for the treatment of this most fatal malady.

Of course, in speaking of food under the head of remedial agencies, I mean such a judicious selection of food as may be digested in the condition of impaired digestive organs and give to the blood all the nutritive material necessary for the restoration of the wasted tissues. In speaking of exercise, I refer to that which is adapted to the condition of the patient; I would emphasize the importance of body exercise in distinction from that of the extremities.

I have often observed the wholesome effect of gardening in certain patients who were manifestly in the incipient stage of consumption. Of course, open air life gives the best air to be had, hence the best element for respiration. In this connection I must express my distrust in all the local means so skillfully used at the present day. It seems to me that the pneumatic cabinet, hot-air inhalations, germicidal inhalants, *et hoc genus omne*, do not afford even a forlorn hope of relief.

I wish to commend the thought of the paper as embodying the personal experience and observations of the author, and trust we may yet have further inquiries in the directions suggested by him.

Dr. John McCurdy, Youngstown, Ohio, said:

I thought when the gentleman started out that he had discovered something new, but I see he has not. I want to take issue with him. I have been practicing medicine thirty-three years, and I do think we have made mighty strides in the treatment of consumption. I do think a



great deal of advice given by physicians in the country is good advice and safe, that is, for the well-being and longevity of our patients. I think about two years was the average length of time a consumptive would live, and we have brought that period up to at least twelve years, and I think if you take the disease in time, it can be averted in three-fourths of the cases. Send your patients to an altitude of seven thousand to nine thousand feet, and keep them there. In many instances recovery will be secured, and, if the patient is kept west of the Mississippi, he may enjoy good health. Continuously, I think we have done a great deal. There is, of course, a certain type of consumption that is destructive. I know I have benefited a good many by telling them to go to Colorado. I think I have benefited a good many by keeping them at home. There are some where the case responds to drugs nicely; others where drugs are of no use, but I think we have done a great deal to lengthen the lives of consumptives.













